

021904 13281 U.S. PTO

Patent Attorney Docket No. 040072-273

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

UTILITY PATENT
APPLICATION TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer Number 2183

U.S. PTO
10780633

021904

Sir:

Enclosed for filing is the utility patent application entitled:

ADAPTIVE THRESHOLD FOR HS-SCCH PART 1 DECODING

by the following named inventor(s):

Johan NILSSON

☒ Applicant(s) suggests Figure 5 for inclusion on the front page of the patent application publication and patent.

☒ Applicant(s) requests that the published application include the following assignment information:
Telefonaktiebolaget LM Ericsson (publ)

☐ Small entity status is claimed.

Also enclosed are:

DRAWINGS: 13 sheets of formal drawings sheets of informal drawings

DECLARATION: ☐ will follow ☐ executed, is enclosed ☒ unexecuted, is enclosed

ASSIGNMENT: ☐ is enclosed ☒ will follow

**CLAIM FOR
PRIORITY
UNDER 35 U.S.
C. § 119 and/or
365:**

| | | |
|---|--|-------------|
| <input type="checkbox"/> is made in the declaration | <input type="checkbox"/> is hereby made as follows | Filing Date |
| Country | Appl. No. | DD-MM-YYYY |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

☐ certified copy(ies) enclosed ☐ certified copy(ies) will follow

OTHER PAPERS: ☐ a General Authorization for Petitions for Extensions of Time and Payment of Fees

☐ an Information Disclosure Statement

☐ an Application Data Sheet (ADS)

☐ _____

☒ The filing fee has been calculated as follows ☐ and in accordance with the enclosed preliminary amendment:

| CLAIMS | | | | | |
|--|------------------|------------|--------------|--------------------|--------------------|
| | No. of Claims | | Extra Claims | Rate | Fee |
| Basic Application Fee (1001) | | | | | \$ 770.00 |
| Total Claims | 47 | MINUS 20 = | 27 | x \$18.00 (1202) = | \$ 486.00 |
| Independent Claims | 6 | MINUS 3 = | 3 | x \$86.00 (1201) = | \$ 258.00 |
| If multiple dependent claims are presented, add \$290.00 (1203) | | | | | |
| Total Application Fee | | | | | \$ 1,514.00 |
| <input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee | | | | | \$ 0.00 |
| Add Assignment Recording Fee of \$40.00 (8021) if Assignment document is enclosed. | | | | | |
| TOTAL APPLICATION FEE DUE | | | | | \$ 1,514.00 |

☐ This application is being filed without a filing fee. Issuance of a Notice to File Missing Parts of Application is respectfully requested.

☐ Charge _____ to Deposit Account No. 02-4800 for the fee due.

☒ A check in the amount of \$ 1,514.00 is enclosed for the fee due.

- ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Please address all correspondence concerning this application to:

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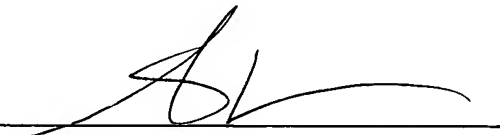
Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Filed: February 19, 2004

By


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